

ROOFING, SIDING, WINDOWS & DOORS PERMIT APPLICATION

Submit to:

(920) 693-3695 Fax:

village@clevelandwi.gov Village of Cleveland PO Box 87 Email: Mail:

Cleveland WI 53015

Date						
Project Address						
Owner			Phone			
Owner Mailing Addre	ess					
Building Type: Re	esidential Con	nmercial	Industrial Institutional Accessory	y		
Contractor			Phone			
Contractor Address						
Dwelling Contractor I	License No	Exp Date				
Dwelling Qualifier Lie	cense No		Exp Date			
Project Cost			_			
Please complete the a	applicable section	ns below	v and on the reverse:			
Roofing:						
Tear off	No	Yes				
Sheathing (replace)	No	Yes	Size: 7/16"			
Ice & water shield	No	Yes				
Roof Vent(s)	No	Yes	Number:			
Ridge Vent	No	Yes				
Shingle warranty	25	30	Other:			
Siding:						
T/O existing siding	No	Yes				
Tyvek/House wrap	No	Yes				
½" r-board	No	Yes				
¹ / ₄ " r-board	No	Yes				
Siding type	Vinyl	Other:	(vertical steel is not allo	owed)		
Alum soffit & fascia	No	Yes				
Trim windows/doors	No	Yes				
Windows:						
Total number of wind	ows		How many are replacement windows?			
Will the size of any w	indow openings b	e change	ed? No Yes*			
If yes, attach a list of t	the window locati	ion(s) and	d if the opening(s) will be made larger or smaller.			

Windows (cont'd):

· · · · · · · · · · · · · · · · · · ·	is (cont uj.					
Location	on: Number:	<u>Type</u> :				
Living		Bow	Slider	Casement	Dbl-Hung	Other:
Kitcher	n	Bow	Slider	Casement	Dbl-Hung	Other:
Dining	<u> </u>	Bow	Slider	Casement	Dbl-Hung	Other:
Bedroo	om	Bow	Slider	Casement	Dbl-Hung	Other:
Bath		Bow	Slider	Casement	Dbl-Hung	Other:
Baseme	ent	Bow	Slider	Casement	Dbl-Hung	Other:
Doors:						
Number	of entrance doors		_	Storms/Screens:	No	Yes
Number	of patio doors		_	Will the size of	any door oper	nings be changed? No Yes*
*If yes, p	please attach a list w	ith the door	·location	(s) and if the ope	enings will be	made larger or smaller.
	C	autionary S	tatement	to Owners Obtai	ning Building	g Permits
as requir	red under s. 101.654	(2)(a), the form	ollowing	consequences m	ight occur:	e contractor is not bonded or insured
(of others that arises o	out of the wo	ork perfo	rmed under the b	uilding permi	s or for any damages to the property t or that is caused by any negligence der the building permit.
t t	because of a violation sub. (1)(a), because	on by the co of any bodi work perfo	ontractor of ly injury ormed un	of the 1&2 Fami to or death of ot der the building	ly Dwelling (hers or for an permit or that	for any loss sustained by the owner Code or an ordinance enacted under y damages to the property of others t is caused by any negligence of the e building permit.
covenant this form State of	ts, utility service line is complete and acc Wisconsin and with	es, etc., that curate. I ag any condit	may affe ree to cor ions attac	ect the above-des mply with all app whed to this appl	cribed premisolicable codes cation and pe	ce and location of any easements, ses. I certify that the information on s of the Village of Cleveland and the ermit. I understand issuance of this part of the contract of th
r ·	The Applicant is re	sponsible f	or conta	cting the Buildi	ng Inspector	to arrange for inspections.
Name (p	rint)					
Signature	e					
For office Tax Parcel 1	use only			Zoning District(s)		e Approved/Fee
						e Permit Issued